## Case 1:19-cv-01701-APM Document 1-1 Filed 06/11/19 Page 1 of 2 CIVIL COVER SHEET

JS-44 (Rev. 6/17 DC)						1-1-1						
I. (a) PLAINTIFFS Ashvin Dhiren Gandhi					DEFENDANTS Centers for Medicare and Medicaid Services							
Ashviri Britteri Garidiii					Contors for injections and injections delivious							
(b) COUNTY OF RESIDENCE OF FIRST LISTED PLAINTIFF 88888					COUNTY OF RESIDENCE OF FIRST LISTED DEFENDANT (IN U.S. PLAINTIFF CASES ONLY)							
(EXCEPT IN U.S. PLAINTIFF CASES)				NOTE: IN LAND CONDEMNATION CASES, USE THE LOCATION OF THE TRACT OF LAND INVOLVED						EÐ		
(c) ATTORNEYS (FIRM NAM	ME, ADDRESS,	AND TELEPHONE NUMBER)		ATTORNEYS (IF KNOWN)								
Stotter & Associates	LLC											
408 SW Monroe Street, Suite M210E												
Corvallis, OR 9733												
(541) 738-2601							-					
II. BASIS OF JURISDICTION (PLACE AN x IN ONE BOX ONLY)			III. CITIZENSHIP OF PRINCIPAL PARTIES (PLACE AN X IN ONE BOX FOR PLAINTIFF AND ONE BOX FOR DEFENDANT) FOR DIVERSITY CASES ONLY!									
1 U.S. Government	eral Question	Lini	PTF DFT			IORDIV			DFT			
Plaintiff		S. Government Not a Party)	Citize	n of this	State	O i	<b>O</b> 1		ated or Principal Place	<b>O</b> 4	O 4	
2 U.S. Government Defendant			Citizen of And		ther State 2		<b>O</b> 2	Incorporated and Principal Place of Business in Another State		<b>O</b> 5	O 5	
				n or Subj			O 3			0		
			Foreig	gn Counti	У			Foreign 1	Nation	<b>O</b> 6	O 6	
IV. CASE ASSIGNMENT AND NATURE OF SUIT												
		ry, A-N, that best repres	ents y	_				•	onding Nature of Sui	t)	1	
O A. Antitrust		ersonal Injury/	(	O C.	Admini	strative	Agency	V	O D. Tempora			
	M	alpractice			Review				Order/Pre Injunction		ry	
410 Antitrust	310 Aiı	-	151 Medicare Act Social Security					Any nature of suit from any category				
		plane Product Liability sault, Libel & Slander										
330 Federal Employers Liability				861 HIA (1395ff) may be selected for this category of case assignment.						ory of		
	340 Marine 345 Marine Product Liability 350 Motor Vehicle 355 Motor Vehicle Product Liability			864 SSID Title XVI  865 RSI (405(g))					*(If Antitrust, then A governs)*			
											4	
360 Other Personal Injury				Other Statutes 891 Agricultural Acts								
		edical Malpractice	893 Environmental Matters									
365 Product Liability 367 Health Care/Pharmaceutical Personal Injury Product Liabi			890 Other Statutory Actions (If Administrative Agency is									
		bestos Product Liability	Involved)									
O F C 16		OD	l		E D	C C		,				
O E. General Civil (Other) OR						Se Ger		ivii	462 Noture 12-4	ion		
Real Property   Bankruptcy   210 Land Condemnation   422 Appeal 27 USC			58		Federal Tax Suits  870 Taxes (US plaintiff or			462 Naturalization Application				
220 Foreclosure		423 Withdrawal 28 U	ISC 15'	7		defendant)			465 Other Immigration			
230 Rent, Lease & Ejectment 240 Torts to Land Prisoner Petitions			871 IRS-Third Party 26 US			26 USC	Actions 470 Racketeer Influenced					
240 Torts to Land Prisoner Petitions 245 Tort Product Liability  535 Death Penalty			7007				& Corrupt Organization					
290 All Other Real Property 540 Mandamus & Ot			her Forfeiture/Penalty 625 Drug Related Seizure of			izure of	480 Consumer Credit					
Personal Property 555 Prison Condition			D				490 Cable/Satellite TV					
Personal Property  370 Other Fraud  555 Prison Condition  556 Civil Detainee –			(00.04)			850 Securities/Commodities/ Exchange						
371 Truth in Lending of Confinement			Other Statutes				896 Arbitration					
380 Other Personal Property Damage Property Rights				Other Statutes 375 False Claims Act			i	899 Administrative Procedure				
Damage Property Rights  385 Property Damage 820 Copyrights					376 Qui Tam (31 USC			Act/Review or Appeal of				
Product Liability 830 Patent		830 Patent			3729(a))			Agency Decision  950 Constitutionality of State				
835 Patent – Abbrev Drug Applicatio			ew	400 State Reapportionment 430 Banks & Banking			Statutes					
Brug Applicatio				450 Commerce/ICC				890 Other Statutory Actions				
				Rates/etc.			(if not administrative agency review or Privacy Act)					
					46	0 Deporta	tion		review or F	rivacy A	et)	

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O G. Habeas Corpus/ 2255  530 Habeas Corpus – General 510 Motion/Vacate Sentence 463 Habeas Corpus – Alien Detainee	O H. Employment Discrimination  442 Civil Rights – Employment (criteria: race, gender/sex, national origin, discrimination, disability, age, religion, retaliation)	O I. FOIA/Privacy Act  September 2	J. Student Loan  152 Recovery of Defaulted Student Loan (excluding veterans)							
	*(If pro se, select this deck)*	*(If pro se, select this deck)*								
<ul> <li>○ K. Labor/ERISA (non-employment)</li> <li>□ 710 Fair Labor Standards Act</li> <li>□ 720 Labor/Mgmt. Relations</li> <li>□ 740 Labor Railway Act</li> <li>□ 751 Family and Medical Leave Act</li> <li>□ 790 Other Labor Litigation</li> <li>□ 791 Empl. Ret. Inc. Security Act</li> </ul>	(non-employment)  (non-employment)  (non-employment)  (non-employment)  (non-employment)  (non-employment)  (1)  441 Voting (if not Voting Rights Act)  Act)  443 Housing/Accommodations  (1)  440 Other Civil Rights  Leave Act  (1)  445 Americans w/Disabilities —  Employment		○ N. Three-Judge Court  441 Civil Rights – Voting (if Voting Rights Act)							
V. ORIGIN										
O 1 Original O 2 Removed O 3 Remanded O 4 Reinstated O 5 Transferred From State From Appellate or Reopened From another Court Court O										
VI. CAUSE OF ACTION (CITE THE U.S. CIVIL STATUTE UNDER WHICH YOU ARE FILING AND WRITE A BRIEF STATEMENT OF CAUSE.) 5 U.S.C. 552, Freedom of Information Act (FOIA)										
VII. REQUESTED IN CHECK IF THIS IS A CLASS ACTION UNDER F.R.C.P. 23  DEMAND \$ Check YES only if demanded in complaint YES NO X										
VIII. RELATED CASE(S) IF ANY	(See instruction) YES	NO X If yes, I	please complete related case form							
DATE: 6/11/19	SIGNATURE OF ATTORNEY OF RE	cord Day State	NO MACONINO 11 MAC							

## INSTRUCTIONS FOR COMPLETING CIVIL COVER SHEET JS-44 Authority for Civil Cover Sheet

The JS-44 civil cover sheet and the information contained herein neither replaces nor supplements the filings and services of pleadings or other papers as required by law, except as provided by local rules of court. This form, approved by the Judicial Conference of the United States in September 1974, is required for the use of the Clerk of Court for the purpose of initiating the civil docket sheet. Consequently, a civil cover sheet is submitted to the Clerk of Court for each civil complaint filed. Listed below are tips for completing the civil cover sheet. These tips coincide with the Roman Numerals on the cover sheet.

- I. COUNTY OF RESIDENCE OF FIRST LISTED PLAINTIFF/DEFENDANT (b) County of residence: Use 11001 to indicate plaintiff if resident of Washington, DC, 88888 if plaintiff is resident of United States but not Washington, DC, and 99999 if plaintiff is outside the United States.
- III. CITIZENSHIP OF PRINCIPAL PARTIES: This section is completed <u>only</u> if diversity of citizenship was selected as the Basis of Jurisdiction under Section II.
- IV. CASE ASSIGNMENT AND NATURE OF SUIT: The assignment of a judge to your case will depend on the category you select that best represents the <u>primary</u> cause of action found in your complaint. You may select only <u>one</u> category. You <u>must</u> also select <u>one</u> corresponding nature of suit found under the category of the case.
- VI. CAUSE OF ACTION: Cite the U.S. Civil Statute under which you are filing and write a brief statement of the primary cause.
- VIII. RELATED CASE(S), IF ANY: If you indicated that there is a related case, you must complete a related case form, which may be obtained from the Clerk's Office.

Because of the need for accurate and complete information, you should ensure the accuracy of the information provided prior to signing the form.